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MAY 17 2006

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IMPORTANT NOTICE

TELECOPY/FACSIMILE COVER LETTER

TO: U.S. Patent and Trademark Office
Examiner: Barbara N. Burgess
Art Unit: 2157

DATE: May 17, 2006

FROM: Troy M. Schmelzer

TIME: _____

TOTAL NO. OF PAGES, INCLUDING COVER: 17

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MESSAGE:

RE: U.S. Patent Application Serial No.: 10/045,698; Our Ref. 81800.0177

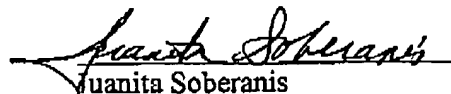
I hereby certify that the following documents:

- ☒ Request for Continued Examination.
- ☒ Petition for Extension of Time.
- ☒ Amendment/Amendment Transmittal.

are being facsimile transmitted to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, for filing in the above application.

May 17, 2006

Date of Deposit


Juanita Soberanis

TELECOPY/FAX NUMBER: 571-273-8300 Art Unit 2157

CLIENT NUMBER: 81800.0177

ATTORNEY BILLING NUMBER: 3212

CONFIRMATION NUMBER: (571) 272-3996 (please return fax to Juanita Soberanis)

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FORM PTO-1083

MAY 17 2006

PATENT
Attorney Docket No. 81800.0177
Customer No. 26021

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Yoshifumi TANIMOTO

Serial No: 10/045,698

Confirmation No: 9845

Filed: January 10, 2002

For: Relay Server, Communication System And Facsimile System

Art Unit: 2157

Examiner: Burgess, Barbara N

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May 17, 2006

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Name

Signature

Date

Mail Stop RCE
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P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith in the above-identified application are the following items:

- ☒ Request for Continued Examination (RCE).
☒ Petition for Extension of Time.
☒ Amendment.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	17	-	20	0	LG=\$50 SM=\$25	\$ 0
INDEPENDENT CLAIMS FEE	4	-	5	0	LG=\$200 SM=\$100	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$380 SMALL ENTITY FEE = \$180	\$ 0
Independent Claims: 1, 2, 8 and 17					TOTAL	\$ 0

- ☐ Please charge the amount of \$____ to cover the additional claims fee to Deposit Account No. 50-1314. A copy of this sheet is enclosed.
- ☐ Please charge the amount of \$____ to cover the extension fee to Deposit Account No. 50-1314. A copy of this sheet is enclosed.
- ☒ The Commissioner is hereby authorized to charge \$790 for the RCE fee and \$1,020 for the Extension fee and any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. A copy of this sheet is enclosed.
- ☒ Any filing fees under 37 C.F.R. 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. 1.17

Respectfully submitted,
HOGAN & HARTSON L.L.P.

Date: May 17, 2006

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By:

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Registration No. 36,667
Attorney for Applicant(s)